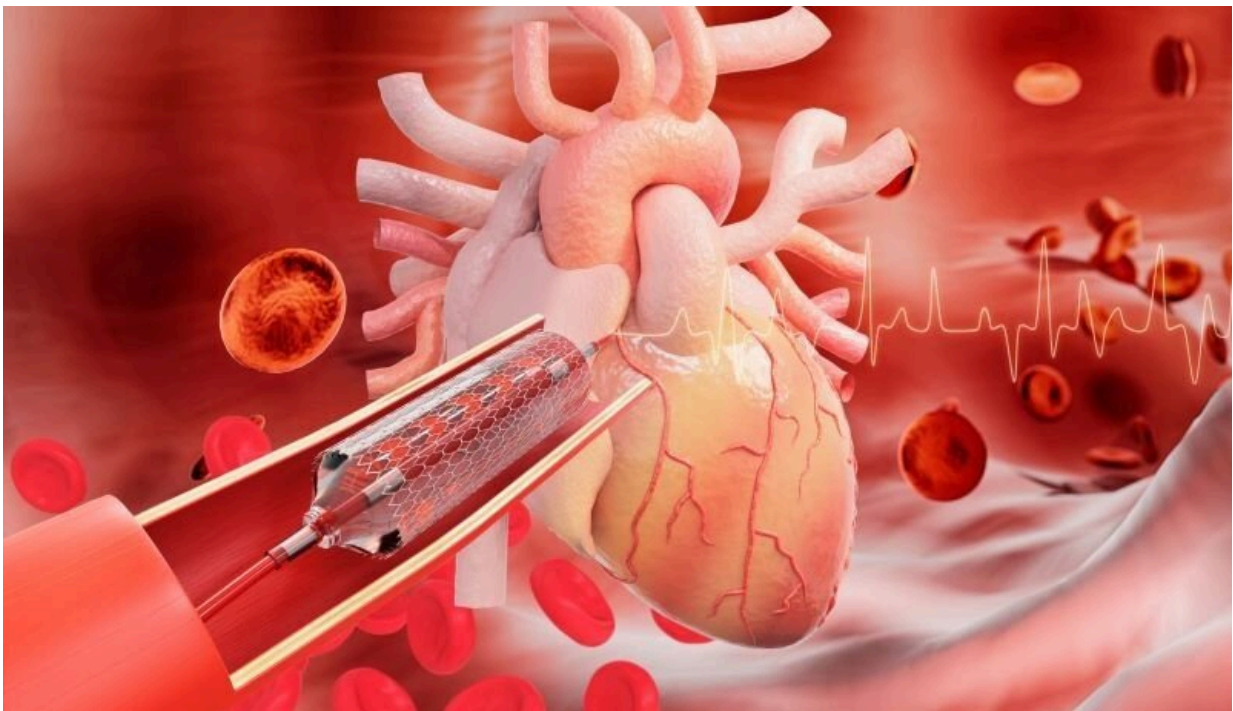


# Paclitaxel-coated balloon effective for coronary in-stent restenosis: Study

March 11 2024, by Elana Gotkine

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A paclitaxel-coated balloon is superior to an uncoated balloon for the composite end point of target lesion failure among patients undergoing

coronary angioplasty for in-stent restenosis, according to a study published online March 9 in the *Journal of the American Medical Association* to coincide with [Cardiovascular Research Technologies 2024](#), held from March 9 to 12 in Washington, D.C.

Robert W. Yeh, M.D., from the Beth Israel Deaconess Medical Center in Boston, and colleagues examined whether a paclitaxel-coated balloon is superior to an uncoated balloon in 600 patients with in-stent restenosis undergoing [percutaneous coronary intervention](#) at 40 centers. Participants were randomly assigned to undergo treatment with a paclitaxel-coated or uncoated balloon (406 and 194 patients, respectively).

The researchers found that the primary end point of one-year target lesion failure occurred in 17.9 and 28.6 percent of patients in the paclitaxel-coated and uncoated balloon groups, respectively, meeting the criteria for superiority (hazard ratio, 0.59). Patients treated with paclitaxel-coated balloon less often had target lesion revascularization and target vessel-related myocardial [infarction](#) (hazard ratios, 0.50 and 0.51, respectively). In the coated versus uncoated balloon groups, the rate of cardiac death was not significantly different (2.9 versus 1.6 percent).

"Paclitaxel-coated balloons are an effective treatment option for patients with coronary in-stent restenosis," the authors write.

**More information:** Robert W. Yeh et al, Paclitaxel-Coated Balloon vs Uncoated Balloon for Coronary In-Stent Restenosis, *JAMA* (2024). [DOI: 10.1001/jama.2024.1361](#)

Amartya Kundu et al, Drug-Coated Balloons for In-Stent Restenosis—Finally Leaving Nothing Behind for US Patients, *JAMA* (2024). [DOI: 10.1001/jama.2024.0813](https://doi.org/10.1001/jama.2024.0813)

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